

CHANGE OF ADDRESS

To register your new address with the Bureau of Motor Vehicle Services fill out this card and return it to us. **THIS IS NOT OFFICIAL ACKNOWLEDGEMENT THAT YOUR NEW ADDRESS HAS BEEN RECORDED WITH THIS DEPARTMENT.** The official notification will be mailed to you at the address given below **AFTER THE RETURN OF THIS CARD.**

Do you want your new address to be used for voter registration purposes? ☐ **YES** ☐ **NO**

NAME: _____
Last First Middle

NEW ADDRESS: _____
Number Street Apt. # Zip Code

Social Security Number: _____ Date of Birth _____
Month Day Year

D.C. Tag D.C. Tag Driver's
No. 1 No. License No. _____

Your Signature: _____